

Utah Influenza Report

This report contains data through the week ending 5/4/2013 (MMWR week 18).

Overview of Influenza Surveillance: Surveillance for the 2012-2013 influenza season officially began on September 30, 2012. The Utah Department of Health publishes a weekly report throughout the active influenza season that synthesizes data from a variety of sources to give the most complete and up-to-date picture of influenza activity in the state of Utah. Data in this report should be considered provisional, and may change as more complete reports are received.

Influenza-like Illness (ILI): The U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) is a national system that conducts surveillance for influenza-like illness (ILI) in outpatient healthcare facilities. ILINet providers report weekly the total number of patients seen for any reason and the number of patients seen with ILI (defined as a fever $\geq 100^{\circ}$ F and a cough or sore throat). These data are used to determine the amount of ILI circulating in the community, as well as provide insight into regional differences in ILI activity. Currently, more than 50 facilities throughout Utah participate in ILINet.

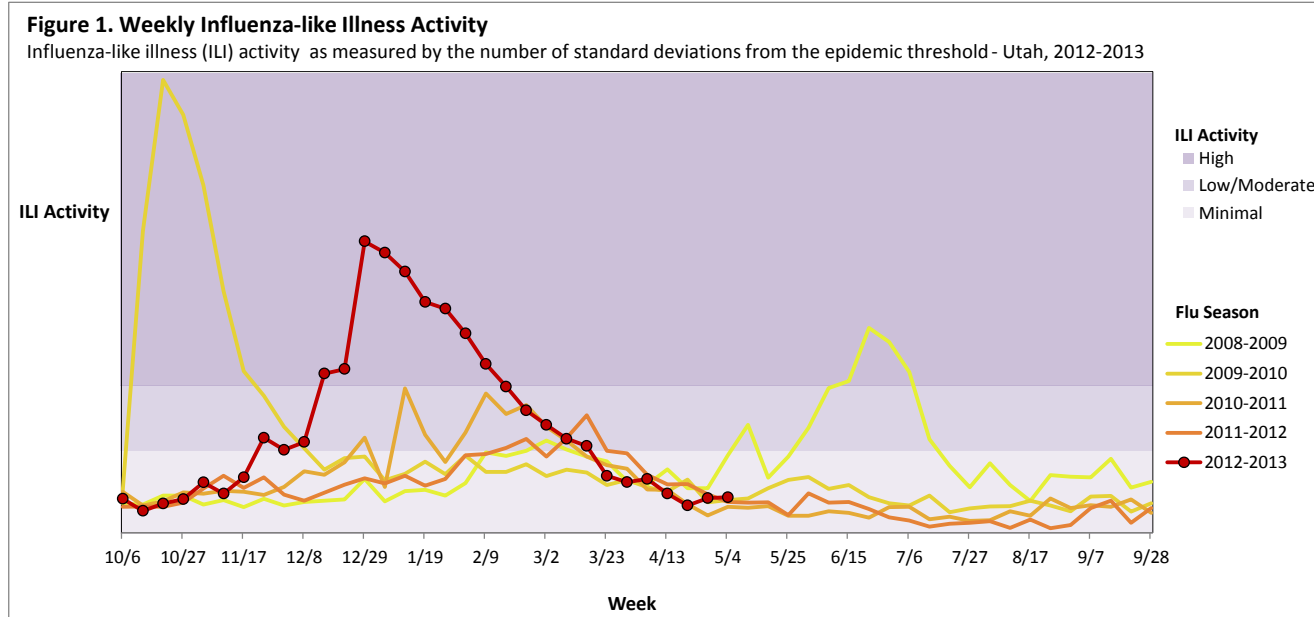


Table 1. Influenza-like Illness (ILI) Activity Levels by Health District - Utah, Current Week

Health District	ILI Activity
Bear River	Minimal
Central	Minimal
Davis	Minimal
Salt Lake	Minimal
Southeastern	No Data
Southwest	Minimal
Summit	Minimal
Tooele	Minimal
TriCounty	No Data
Utah	Minimal
Wasatch	Minimal
Weber-Morgan	Minimal
State	Minimal

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Influenza Hospitalizations: Influenza hospitalizations are a reportable condition in Utah. A person meets the case definition for an influenza hospitalization if they are hospitalized for any length of time and have an influenza positive serology, DFA, PCR, or culture test (confirmed case) or a positive rapid influenza diagnostic test (probable case). Public health in Utah gathers a variety of data on influenza hospitalizations including clinical features, course of illness, risk and protective factors, and influenza type and subtype. Data from influenza hospitalizations allows public health in Utah to better understand subgroups of the Utah population that are most severely effected by influenza and help to guide prevention messages and interventions.

Figure 2. Influenza Hospitalizations

Number of influenza hospitalizations by event date* - Utah, 2012-2013

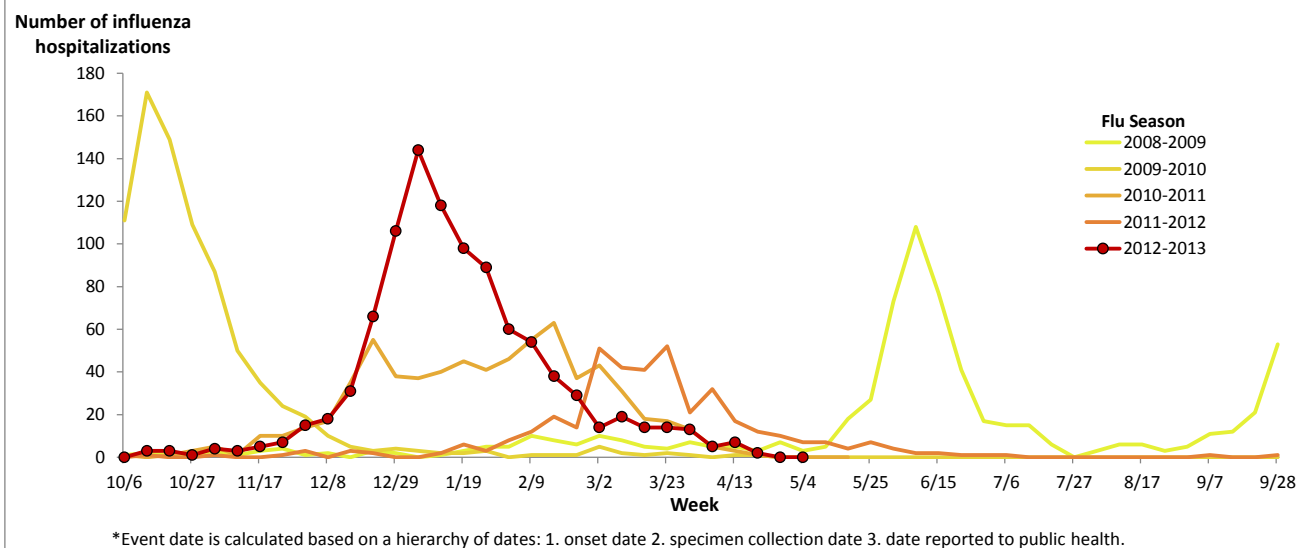


Table 2. Influenza Hospitalizations by Case Status - Utah

Case Status	Current Week		Season To Date	
	Total	% of Cases	Total	% of Cases
Confirmed	0	0.0	921	94.0
Probable	0	0.0	59	6.0
Total	0	0.0	980	100.0

Table 3. Influenza Hospitalizations by Health District - Utah

Health District	Current Week	Season To Date
Bear River	0	50
Central	0	42
Davis	0	74
Salt Lake	0	440
Southeastern	0	3
Southwest	0	106
Summit	0	14
Tooele	0	6
TriCounty	0	17
Utah	0	147
Wasatch	0	4
Weber-Morgan	0	77
State	0	980

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Table 4. Influenza Hospitalizations by Age Group - Utah, Season To Date

Age Group	Total Cases	% of Cases	Rate*
0-4	192	19.6	70.95
5-24	139	14.2	14.69
25-49	125	12.8	12.60
50-64	130	13.3	32.46
65+	394	40.2	159.52
Total	980	100.0	34.31

*Rate is calculated as the number of cases per 100,000 population

Table 5. Influenza Hospitalizations by Sex and Race - Utah, Season To Date

Variable	Num. of Cases	% of Cases	% in Utah Pop	p value*
Sex				
Male	480	49.0	50.3	0.4076
Female	499	50.9	49.7	0.4447
Unknown	1	0.1	NA	--
Race				
White, Not Hispanic	772	78.8	82.0	0.0078
Hispanic	128	13.1	11.6	0.1494
Native Hawaiian/Pacific Islander	38	3.9	0.7	<0.0001
Black/African American	17	1.7	0.9	0.0090
American Indian	5	0.5	1.1	0.0657
Asian	20	2.0	1.9	0.6912
Unknown	0	0.0	NA	--

*If a p value is ≤ 0.05 , there is a significant difference between the percentage seen in influenza hospitalizations and the general Utah population.

Table 6. Summary Data for Influenza Hospitalizations - Utah, Season To Date

Variable	Yes		No		Unknown	
	Total	% of Cases	Total	% of Cases	Total	% of Cases
ICU	157	16.0	769	78.5	54	5.5
Ventilator	57	5.8	872	89.0	51	5.2
Died	32	3.3	900	91.8	48	4.9
Neurological Symptoms	116	11.8	791	80.7	73	7.4
Healthcare Worker	7	0.7	585	59.7	388	39.6
Pregnant	32	3.3	940	95.9	8	0.8
Heart Disorder	302	30.8	613	62.6	65	6.6
Blood Disorder	24	2.4	889	90.7	67	6.8
Kidney Disorder	88	9.0	825	84.2	67	6.8
Metabolic Disorder	250	25.5	664	67.8	66	6.7
Chronic Respiratory Disorder	287	29.3	631	64.4	62	6.3
Immunosuppressed	94	9.6	814	83.1	72	7.3
Neurological Disorder	116	11.8	791	80.7	73	7.4
Seizure Disorder	36	3.7	879	89.7	65	6.6
Bacterial Co-infection	18	1.8	894	91.2	68	6.9
Obese*	200	31.0	326	50.5	119	18.4
Morbidly Obese*	43	6.7	483	74.9	119	18.4
Risk Factor†	890	90.8	90	9.2	0	0.0
Vaccinated	355	36.2	438	44.7	187	19.1

*Obesity and morbid obesity is not considered for individuals under 18 years or pregnant women. Thus total counts will not equal the total number of influenza-associated hospitalizations

†Risk factors for influenza include: persons < 5 years, persons ≥ 65 years, pregnant women, and persons with a chronic medical condition.

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Student Absenteeism: School-age children are at high risk for respiratory virus infections, including influenza. Aggregate, all-cause absenteeism data is collected weekly from over 350 schools throughout Utah. These data are analyzed to identify elevated absenteeism rates that could indicate the circulation of influenza in school-age children.

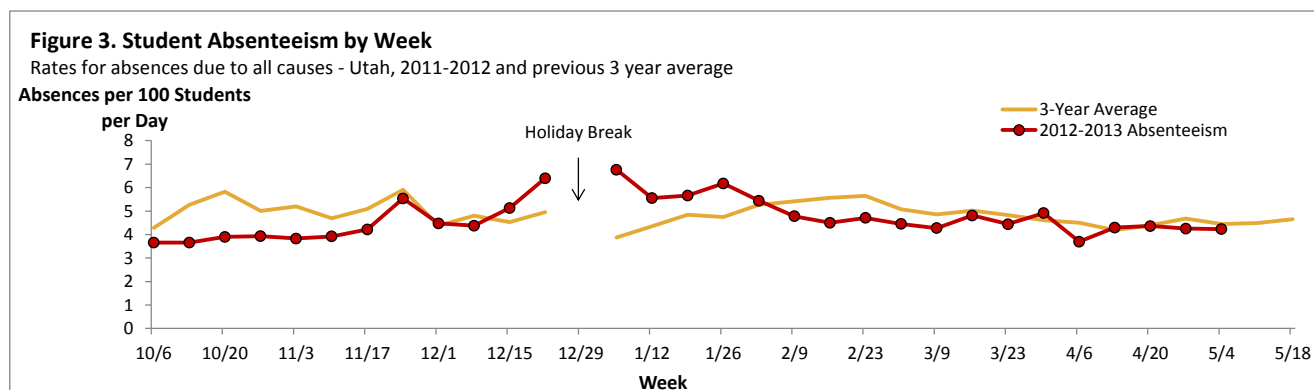
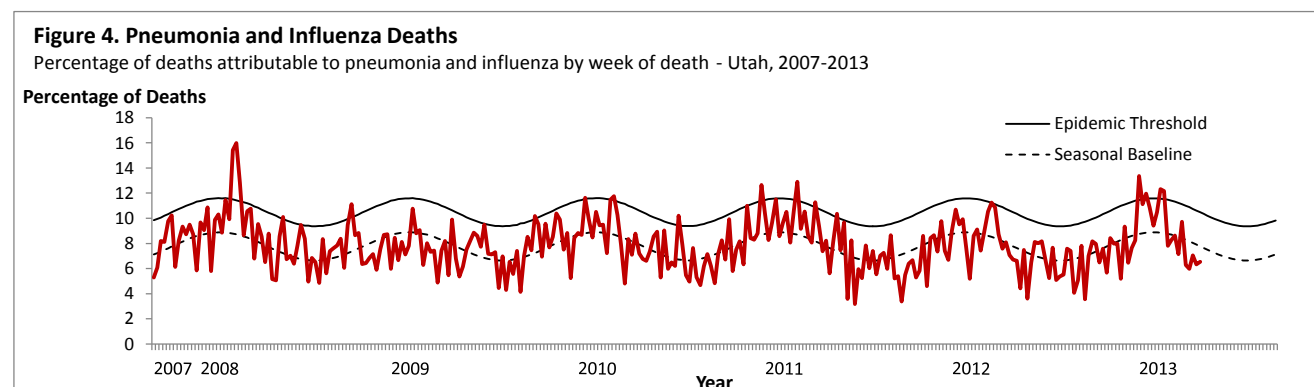


Table 7. Weekly Student Absenteeism - Utah, Current Week

Health District	Absences per 100 students/day
Bear River	3.3
Central	3.8
Davis	3.9
Salt Lake	4.0
Southeast	6.2
Southwest	4.9
Summit	4.5
Tooele	4.9
TriCounty	4.9
Utah	2.1
Wasatch	4.4
Weber-Morgan	5.0
State	4.3

Pneumonia and Influenza Deaths: Each week the total number of death certificates received and the number of those for which pneumonia or influenza was listed as an underlying or contributing cause of death is collected. The percentage of deaths due to pneumonia and influenza are compared with a seasonal baseline and epidemic threshold value calculated for each week. These data are used to monitor the severity of influenza illness in the community.



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Laboratory Surveillance: The Unified State Laboratory: Public Health receives specimens from all over the state for comprehensive influenza testing. All specimens are tested to determine influenza type and subtype. A portion of specimens are also sent to the Centers for Disease Control and Prevention for additional testing, including gene sequencing, antiviral resistance testing and antigenic characterization.

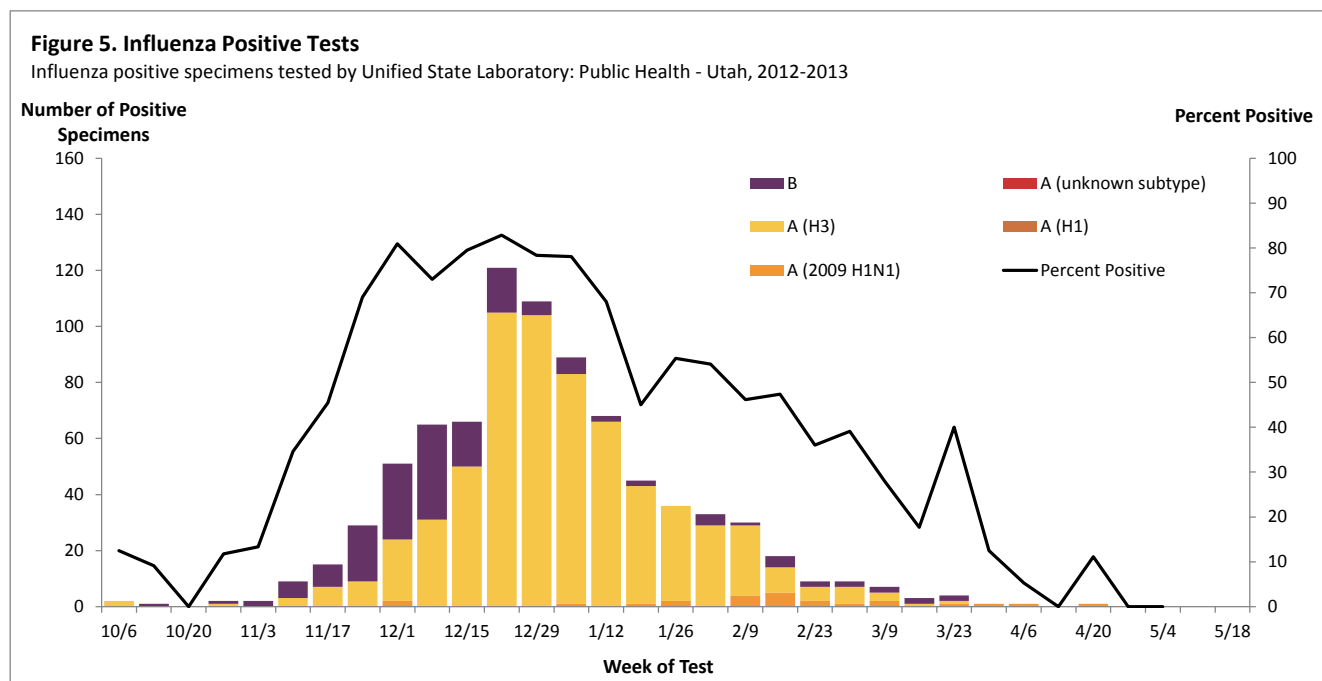


Table 8. Unified State Laboratory: Public Health Influenza Testing Data

	Current Week		Season To Date	
	Total	Percent	Total	Percent
Specimens tested	8	--	1,391	--
Positive specimens	0	0.0	826	59.4
Positive Specimens by Type/Subtype				
Influenza A	0	0.0	661	80.0
A (2009 H1N1)	0	0.0	24	3.6
A (H1)	0	0.0	0	0.0
A (H3)	0	0.0	637	96.4
A (unable to subtype)	0	0.0	0	0.0
Influenza B	0	0.0	165	20.0